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Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (If known):	Chapter you are filing under:
	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Shirley First name C. Middle name Hunter Last name Suffix (Sr., Jr., II, III)	Albert First name R. Middle name Hunter Last name Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	First name Middle name Last name	First name Middle name Last name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - <u>1</u> <u>2</u> <u>3</u> <u>6</u> OR 9 xx - xx - <u>xx - </u>	xxx - xx - <u>8</u> <u>5</u> <u>9</u> <u>8</u> OR 9 xx - xx xx

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Case number (if known)_____

Shirley C. and Albert R. Hunter

Debtor 1

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in	I have not used any business names or EINs.	☑ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
		243630
	EIN	EIN
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
	705 East 156th Place Number Street	Number Street
	South Holland IL 60473 City State ZIP Code	City State ZIP Coo
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Cod
Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
		

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Shirley C. and Albert R. Hunter

Debtor	1 Shirley C. and First Name Middle Name	l Albert	R. Hu	unter		Case number (if ki	nown)
	_						
Part 2	Tell the Court Abou	it Your B	ankruj	otcy Case			
7. Th Ba	chapter of the kruptcy Code you			a brief description of Form 2010)). Also, go			U.S.C. § 342(b) for Individuals Filing ne appropriate box.
	e choosing to file ider	☐ Cha	oter 7				
uii	idei	☐ Cha	oter 11				
		☐ Cha	oter 12				
		☑ Cha					
8. Ho	ow you will pay the fee	loca your subr with I nee Appo	court if self, you nitting you a pre-ped to plication uest the aw, a just than 18 the fee	for more details about may pay with case your payment on your inted address. ay the fee in instal for Individuals to Property of the part my fee be waited address.	the thouse of the control of the con	nay pay. Typical heck, or money ar attorney may a choose this op Fee in Installme request this opt waive your fee, at applies to you is option, you m	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check of the control o
	Have you filed for bankruptcy within the	□ No	P IIIII	ND Illinois		10/1/10015	45 44050 (1.1.1)
	st 8 years?	☑ Yes.	District	ND Illinois	When	12/11/2015 MM / DD / YYYY	Case number 15-41853 (Joint)
			District	ND Illinois	When	04/17/2015	Case number 15-13736 (Joint)
				ND Illinois		MM / DD / YYYY 12/14/2012	12 40110 / loint\
			District	ND IIIIIOIS	When	MM / DD / YYYY	Case number 12-49119 (Joint)
10. Ar	e any bankruptcy	☑ No					
ca: file	ses pending or being ed by a spouse who is	Yes.	Debtor				Relationship to you
no yo pa	not filing this case with you, or by a business partner, or by an						Case number, if known
ап	iliate?		Debtor				Relationship to you
							Case number, if known
						MM / DD / YYYY	
	you rent your sidence?	☑ No. ☐ Yes.	Go to I Has yo	ur landlord obtained a	an eviction judg	ment against you	and do you want to stay in your
			☐ Ye	. Go to line 12. s. Fill out <i>Initial Stater</i> s bankruptcy petition.	nent About an E	Eviction Judgment	t Against You (Form 101A) and file it with

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. Are you a sole proprietor	□ No. (Go to Part 4.			
of any full- or part-time business?		Name and location of but	sings		
A sole proprietorship is a	103.	_			
business you operate as an individual, and is not a		Day care out of hon Name of business, if any	ne	7	
separate legal entity such as a corporation, partnership, or LLC.		705 East 156th Plac	ce		
If you have more than one sole proprietorship, use a					
separate sheet and attach it to this petition.		South Holland		IL	60473
to and position.		City		State	ZIP Code
		Check the appropriate bo	ox to describe your busin	ess:	
		☐ Health Care Business			
		☐ Single Asset Real Es	tate (as defined in 11 U.S	S.C. § 101(51E	3))
		☐ Stockbroker (as defin	ed in 11 U.S.C. § 101(53	3A))	
		Commodity Broker (a	s defined in 11 U.S.C. §	101(6))	
		Mone of the above			
For a definition of small		No. I am not filing under Chapter 11.			
	☐ No.	I am filing under Chapter the Bankruptcy Code.	11, but I am NOT a smal	ll business deb	otor according to the definition in
	☐ Yes.	I am filing under Chapter Bankruptcy Code.	11 and I am a small busi	ness debtor a	ccording to the definition in the
				That Needs	Immediate Attention
art 4: Report if You Own	or Have	Any Hazardous Prope	erty or Any Property		
		Any Hazardous Prope	erty or Any Property	······································	
Do you own or have any property that poses or is	⊿ No		erty or Any Property		
Do you own or have any property that poses or is alleged to pose a threat of imminent and	⊿ No	Any Hazardous Property of the Nazard?	erty or Any Property		
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	⊿ No		erty or Any Property		
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any	⊿ No		erty or Any Property		
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	⊿ No	What is the hazard?		?t	
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs	⊿ No	What is the hazard?		d?	
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock	⊿ No	What is the hazard? If immediate attention is		d?	
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	⊿ No	What is the hazard? If immediate attention is Where is the property?		d?	
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	⊿ No	What is the hazard? If immediate attention is Where is the property?	needed, why is it needed	d?	
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	⊿ No	What is the hazard? If immediate attention is Where is the property?	needed, why is it needed	d?	

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Debtor 1

Shirley C. and Albert R. Hunter

Case number (if known)	
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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor	1
-------	--------	---

You must check one

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing al	oou
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	g about
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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De	Shirley C. and	Albert R. Hunter Last Name	Case number (if known)
Pa	art 6: Answer These Ques	stions for Reporting Purposes		
16.	What kind of debts do you have?	16a. Are your debts primarily of as "incurred by an individual pr ☐ No. Go to line 16b. ☐ Yes. Go to line 17.	consumer debts? Consumer of the consumer of th	debts are defined in 11 U.S.C. § 101(8) ousehold purpose."
		16b. Are your debts primarily I	business debts? Business del	ots are debts that you incurred to obtain
		No. Go to line 16c. Yes. Go to line 17.	ment or through the operation of	the business or investment.
		16c. State the type of debts you own	e that are not consumer debts or	business debts.
17.	Are you filing under Chapter 7?	☑ No. I am not filing under Chapte	er 7. Go to line 18.	1994 - В ОСПОВИТИЛНИТЕЛЬНИЙ МЕТЕРИТЕТИИ В СОСТОВЕННИЙ В СОСТОВЕННИЙ В СОСТОВЕННИЙ В СОСТОВЕННИЙ В СОСТОВЕННИЙ В
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes. I am filing under Chapter 7. administrative expenses an ☐ No ☐ Yes	Do you estimate that after any e. e paid that funds will be available	xempt property is excluded and to distribute to unsecured creditors?
18.	How many creditors do you estimate that you owe?	1 1-49	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19.	How much do you estimate your assets to be worth?	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	How much do you estimate your liabilities to be? rt 7: Sign Below	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	□ \$500,000,001-\$1 billion □ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion □ More than \$50 billion
Fo	r you	I have examined this petition, and I correct.	declare under penalty of perjury th	nat the information provided is true and
		If I have chosen to file under Chapte of title 11, United States Code. I und under Chapter 7.	er 7, I am aware that I may procee lerstand the relief available under	d, if eligible, under Chapter 7, 11,12, or 13 each chapter, and I choose to proceed
		If no attorney represents me and I di this document, I have obtained and r	id not pay or agree to pay someon read the notice required by 11 U.S	ne who is not an attorney to help me fill out S.C. § 342(b).
		I request relief in accordance with th		·
		understand making a false stateme with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 1519, and 3	fines up to \$250,000, or imprison	ing money or property by fraud in connection ment for up to 20 years, or both.
		Signature of Debtor 1	Signal	Weef then to

Executed on 05/23/2017 MM / DD / YYYY

Official Form 101

Executed on 05/23/2017 MM / DD / YYYY

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ates Code, and also certify the	d have exp lat I have d l(D) applie:	
Date		
Date		
IL	60805	
State	ZIP Code	44, 1.
Email address	steveno	law@sbcglobal.net
IL		
State		
	Email address	Email address S <u>teveno</u>

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Fill in this information to identify your case:	
Debtor 1 SHIRLEY C. HUNTER	
First Name Middle Name Last Name Debtor 2 ALBERT R. HUNTER	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number	☐ Check if this is an
(If known)	amended filing
Official Form 106Sum	
	4.
Summary of Your Assets and Liabilities and Certain Statistical Info	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended	supplying correct
your original forms, you must fill out a new Summary and check the box at the top of this page.	scriedules after you file
Down Commonitor Vocation	
Part 1: Summarize Your Assets	
	Your assets
	Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	s 140,000.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$
1b. Copy line 62, Total personal property, from Schedule A/B	s 28,600.00
	<u> </u>
1c. Copy line 63, Total of all property on Schedule A/B	\$ 168,600.00
Part 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	s 260,000.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3. Copy the total claims from Red 1 (priority unsecured plains) from New New Red 1 (priority unsecured plains)	s 0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$4,087.00
Your total liabilities	\$ 264,087.00
	L
Part 3: Summarize Your Income and Expenses	
4 Schodula I: Vaur Jacoma (Official Forms 400)	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$4,200.00
5. Schedule J: Your Expenses (Official Form 106J)	
o. Concesso o. Four Expenses (Unicial Full) 1003)	

Copy your monthly expenses from line 22c of Schedule J

3,233.00

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SHIRLEY C. HUNTER Debtor 1 Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **☑** Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 2,500.00 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 0.00 9a. Domestic support obligations (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 0.00

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

0.00

0.00

0.00

0.00

0.00

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Fill in this information to identify your case and thi	s filing:	
Debtor 1 SHIRLEY C. HUNTER		
First Name Middle Name	Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name	
United States Bankruptcy Court for the: Northern District of	f Illinois	
Case number		_
		☐ Check if this is an amended filing
Official Form 106A/B		ao.naoa iiii.ng
Schedule A/B: Propert	y	12/15
In each category, separately list and describe item category where you think it fits best. Be as compl responsible for supplying correct information. If m write your name and case number (if known). Answers Part 1: Describe Each Residence, Building.	ete and accurate as possible. If two married peopl lore space is needed, attach a separate sheet to th	e are filing together, both are equally is form. On the top of any additional pages,
Do you own or have any legal or equitable interes	est in any residence, building, land, or similar prop	erty?
No. Go to Part 2.	, , , , , , , , , , , , , , , , , , ,	
Yes. Where is the property?	Milest in the property? Charles that and	
705 Foot 456th Bloom	What is the property? Check all that apply. Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:
1.1. 705 East 156th Place Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Claims Secured by Property.
•	Condominium or cooperative Manufactured or mobile home	Current value of the entire property? Current value of the portion you own?
	Land	\$ 100,000.00 \$ 100,000.00
South Holland IL 60473	Investment property	Describe the section of
City State ZIP Code	☐ Timeshare ☐ Other	Describe the nature of your ownership interest (such as fee simple, tenancy by
	Who has an interest in the property? Check one.	the entireties, or a life estate), if known. Fee Simple
USA	Debtor 1 only	r ce diripie
County	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Check if this is community property
	At least one of the debtors and another	(see instructions)
	Other information you wish to add about this it	em, such as local
If you own or have more than one, list here:	property identification number:	47444
	What is the property? Check all that apply.	Do not deduct secured claims or exemptions. Put
_{1.2.} 15656 So. Langley	Single-family home	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
Street address, if available, or other description	☐ Duplex or multi-unit building☐ Condominium or cooperative	
	☐ Manufactured or mobile home	current value of the entire property? Current value of the portion you own?
	Land Investment property	\$ 40,000.00 \$ 40,000.00
South Holland IL 60473 City State ZIP Code	Timeshare Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
	Who has an interest in the property? Check one.	Fee Simple
	Debtor 1 only	
County	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Check if this is community property
	At least one of the debtors and another	(see instructions)
	Other information you wish to add about this iter property identification number:	m, such as local

What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? ■ Manufactured or mobile home ☐ Land Investment property City Describe the nature of your ownership State ZIP Code ☐ Timeshare interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 140.000.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No ☑ Yes Nissan Who has an interest in the property? Check one. Make: 3.1 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Juke Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2013 Year: Debtor 1 and Debtor 2 only Current value of the Current value of the 40,000 entire property? Approximate mileage: portion you own? At least one of the debtors and another Other information: 15.000.00 15,000.00 ☐ Check if this is community property (see instructions) If you own or have more than one, describe here: Tovota Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Sienna Model: Creditors Who Have Claims Secured by Property Debtor 2 only 2008 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only 140k Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 500.00 500.00 Check if this is community property (see instructions)

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Debtor 1

SHIRLEY C. HUNTER

Doc 1

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Document

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SHIRLEY C. HUNTER Document Page 12 of 48 Prior Middle Name Last Name Page 12 of 48 Prior Middle Name Last Name Page 12 of 48 Prior Middle Name Last Name Page 12 of 48 Prior Middle Na

	tors, personal wate	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) other recreational vehicles, other vehicles, and accessor accraft, fishing vessels, snowmobiles, motorcycle accessor.		\$ 500.00 aims or exemptions. Put ad claims on Schedule D:
ake: odel: ear: oproximate mileage: ther information:	omes, ATVs and otors, personal wate	□ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) other recreational vehicles, other vehicles, and accessor according to the debtors and accessor accessor accessor accessor accessor accessor accessor.	\$ 500.00 Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$	\$ 500.00 aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. Current value of the portion you own?
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oproximate mileage: ther information: aft, aircraft, motor h es: Boats, trailers, mot	tors, personal wate	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) other recreational vehicles, other vehicles, and accessor accertaft, fishing vessels, snowmobiles, motorcycle accessor	Current value of the entire property? \$	Current value of the portion you own?
oproximate mileage: ther information: aft, aircraft, motor h es: Boats, trailers, mot	tors, personal wate	At least one of the debtors and another Check if this is community property (see instructions) other recreational vehicles, other vehicles, and accessor ercraft, fishing vessels, snowmobiles, motorcycle accessor	entire property? \$ ssories	portion you own?
aft, aircraft, motor h	tors, personal wate	Check if this is community property (see instructions) other recreational vehicles, other vehicles, and accessor	\$ssories	•
aft, aircraft, motor h	tors, personal wate	instructions) other recreational vehicles, other vehicles, and accessorance fishing vessels, snowmobiles, motorcycle accessor	ssories	\$
es: Boats, trailers, mo	tors, personal wate	ercraft, fishing vessels, snowmobiles, motorcycle accesso		
odel: ear: ther information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:
n or have more than	one, list here:			
ake:		· · ·	Do not deduct secured cla	
odel:	·	•	the amount of any secured Creditors Who Have Claim	
ear:		•		Current value of the
her information:		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
		☐ Check if this is community property (see instructions)	\$	\$
	and the special control			
in al	n or have more than a	n or have more than one, list here: ke: del:	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) The or have more than one, list here: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Debtor 1 and Debtor 2 only At least one of the debtors and another Current value of the entire property? Check if this is community property (see instructions) To rhave more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claim the amount of any secure Creditors Who Have Claim Current value of the entire property? Current value of the entire property?

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 Debtor 1
 Case number (if known)

 First Name
 Middle Name
 Last Name

P	art 3: Describe Your	Personal and Household Items		
D	o you own or have any le	gal or equitable interest in any of the following items?	portion yo	ct secured claims
6.	Household goods and f	urnishings		
		ces, furniture, linens, china, kitchenware		
	□ No	CONTRACTOR OF THE CONTRACTOR O		
	Yes. Describe	Misc. household appliances and furniture	\$	1,000.00
7.	Electronics			
	Examples: Televisions as collections; el	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ectronic devices including cell phones, cameras, media players, games		
	No No Describe			000.00
	Tes. Describe	Television and two cell phones	\$	200.00
8.	Collectibles of value			
	Examples: Antiques and stamp, coin, o	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
	Yes. Describe		\$	
9.	Equipment for sports ar		waccook	
	Examples: Sports, photog	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes arpentry tools; musical instruments		
	☐ Yes. Describe		\$	
10	Firearms]	
10		shotguns, ammunition, and related equipment		
	Yes. Describe		\$	
11	. Clothes		NIL AA	
1 1		nes, furs, leather coats, designer wear, shoes, accessories		
	□ No	noo, ratio, routio, doorgiet wout, shoos, accessories		
		Misc. everyday clothing	\$	100.00
	***		3	
12	Jewelry			
	examples: Everyday jewe gold, silver	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	☐ No	TO THE COLUMN THE COLU	*****	
	Yes. Describe	Wedding rings and misc. costume jewelry	\$	200.00
13	Non-farm animals	ggo unuoo. oostamo jonon j		
	Examples: Dogs, cats, bir	ds, horses		
	☑ No			
	Yes. Describe		\$	
1.8	Any other nemonal and	household items you did not already list, including any health aids you did not list	and a	
14.		nousenous items you did not already list, including any nealth aids you did not list		
	No Yes. Give specific			
	information		\$	
15.	Add the dollar value of a	all of your entries from Part 3, including any entries for pages you have attached	Ţ.	1,400.00
	for Part 3. Write that nur	mber here	"	1,700.00

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Debtor 1

First Name Middle Name Last Name

Case number (if known)

Case number (if known)

Part 4: Describe Yo	ur Financial Assets			
Do you own or have any	legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money you	have in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file y	our petition	
□ No				
		Cas	sh:	\$50.00
17. Deposits of money Examples: Checking, s and other s	savings, or other financial accou imilar institutions. If you have m	ints; certificates of deposit; shares in credit unions, broultiple accounts with the same institution, list each.	okerage houses,	
☐ No				
☑ Yes		Institution name:		
	17.1. Checking account:	Citizen's Financial		s 100.00
	17.2. Checking account:	Citizen's Financial		s 50.00
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:			\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			\$
	or publicly traded stocks investment accounts with broken	erage firms, money market accounts		
☑ No				
☐ Yes	Institution or issuer name:			
				\$
				\$
				\$
19. Non-publicly traded s an LLC, partnership, a		rated and unincorporated businesses, including a	n interest in	
☑ No	Name of entity:	% 0	f ownership:	
Yes. Give specific information about		0%		\$
them		0%		\$
		0%	<u>o </u> %	\$

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Debtor 1					Case number (if known)	
	First Name	Middle Name	Last Name		5	
				eneveny akaan makaan maraka ka sa	Annon III a an isang at an	Maria ii - M. A Maria
0. Governn	nent and corp	orate bonds and otl	her negotial	ole and non-negotiable instru	ments	
Negotiab	le instruments	include personal che	cks, cashier	s' checks, promissory notes, an	d money orders.	
	ouable ilistratii	ents are those you ca	ainioi ii aiisie	er to someone by signing or deli	vering them.	
☑ No		To a				
	Give specific nation about	Issuer name:				
them.						\$
						- \$
						- \$
21 Potiromo	ent or pension	accounta				
			401(k), 403(b), thrift savings accounts, or oth	ner pension or profit-sharing pla	ins
No No				•	7	
Yes. I						
accou	unt separately.	Type of account:	Institution	name:		
		401(k) or similar plan:	:			<u> </u>
		Pension plan:				
		IRA:				\$
		Retirement account:				\$
		Keogh:				\$
		Additional account:				
		Additional account:				
Your share Examples	deposits and re of all unused s: Agreements es, or others	deposits you have r	nade so that id rent, publi	you may continue service or us ic utilities (electric, gas, water),	se from a company telecommunications	
Yes		In	stitution nam	e or individual:		
		Electric:	*			- \$
		Gas:				- \$ <u> </u>
		Heating oil:				- \$ <u></u>
		Security deposit on re	ental unit:		· · · · · · · · · · · · · · · · · · ·	- \$
		Prepaid rent:				- \$
		Telephone:				- \$
		Water:				- \$
		Rented furniture:				- \$
		Other:				- \$
						Ψ
3. Annuities	(A contract fo	r a periodic payment	of money to	you, either for life or for a numb	per of years)	
☑ No		- ·	•		• ,	
		Issuer name and des	scription:			
						\$
						\$
			·			\$

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Debtor 1	Case number (if kno	wn)
First Name Middle Name	Last Name	
26 U.S.C. §§ 530(b)(1), 529A(b), and 52	ecount in a qualified ABLE program, or under a qualified state 9(b)(1).	tuition program.
☑ No ☐ YesInstitutio	n name and description. Separately file the records of any interests	s.11 U.S.C. § 521(c):
		·
		¥
25. Trusts, equitable or future interests in exercisable for your benefit	property (other than anything listed in line 1), and rights or po	owers
☑ No	NO. AND ADDRESS OF THE PARTY OF	
Yes. Give specific information about them		\$
26. Patents, copyrights, trademarks, trade Examples: Internet domain names, webs ✓ No ✓ Yes. Give specific information about them	e secrets, and other intellectual property sites, proceeds from royalties and licensing agreements	\$
27. Licenses, franchises, and other gener	ral intangibles censes, cooperative association holdings, liquor licenses, profession	
✓ No	enses, cooperative association holdings, liquor licenses, profession	nal licenses
Yes. Give specific	ARTON AND THE SECOND SEC	TOTAL CONTROL OF THE STATE OF T
information about them		\$
Exercise 200.00000	ad 1999 - P. C.	onness anness angegengegenetetetete 2 Total Selle Sell Total Selle Total Selle
Money or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you		•
☑ No		
Yes. Give specific information		ederal: \$
about them, including whether you already filed the returns		•
and the tax years.		ate: \$ ocal: \$
	CC	Ф
🗹 No	y, spousal support, child support, maintenance, divorce settlement,	property settlement
Yes. Give specific information		mony:
		nony: \$intenance: \$
		intenance: \$port: \$
		orce settlement: \$
		perty settlement: \$
30 Other amounte company away	S	· ,
 Other amounts someone owes you Examples: Unpaid wages, disability insure Social Security benefits; unpa 	rance payments, disability benefits, sick pay, vacation pay, workers aid loans you made to someone else	s' compensation,
☑ No		
☐ Yes. Give specific information		7000 000 000 000 000 000 000 000 000 00
		\$

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Debtor 1	First Name Middle Name	e Last Name	Case number (if known)	
	ristranie ividue (vanie	cast Name		
	. Al-Make . 1 to	Company of the second of the s	And the second of the second o	WAR 60' 11811 18 500 W.H
	s in insurance policies			
	s: Health, disability, or life	e insurance; health savings account (HSA	s); credit, homeowner's, or renter's insurance	
☐ No	Name the insurance com			
	of each policy and list its		Beneficiary:	Surrender or refund value
	• •	Capital Choice (term life)	Children	\$ 0.00
				•
				_ •
If you are	the beneficiary of a livin	due you from someone who has died g trust, expect proceeds from a life insura	nce policy, or are currently entitled to receive	
property No	because someone has di	ea.		
	Give specific information			***************************************
— 165.	Give specific information.			S

3. Claims a	gainst third parties, wh	ether or not you have filed a lawsuit or it disputes, insurance claims, or rights to s	made a demand for payment	
2 No	a. Accidenta, employmen	t disputes, insurance claims, or rights to s	ue	
	Describe each claim			Annah op 1900
- 100.	Describe edoir olarir			\$
4. Other co	ntingent and unliquidat	ed claims of every nature, including co	ounterclaims of the debtor and rights	
to set of	f claims	•	Ç	
☑ No	D "	Same and an experience of the same and the s		
☐ Yes.	Describe each claim			•
		C		Ψ
	ncial assets you did not	: already list		
☑ No	Olive and alfa information	**************************************		***************************************
Tes.	Give specific information.	S S S S S S S S S S S S S S S S S S S		\$
6. Add the	dollar value of all of you	ur entries from Part 4, including any en	tries for pages you have attached	200.00
ior Part 4	. write that number ne	re	→	\$
	1.11 1.14 1.14 1.14 1.14 1.14 1.14 1.14	and the second of the second o	The same of the second control of the second	a wasan sa waxa a ga
art 5:	Describe Any Busi	ness-Related Property You Ov	wn or Have an Interest In. List any	real estate in Part 1.
7. Do you o	wn or have any legal or	equitable interest in any business-rela	ated property?	
	So to Part 6.	,		
Yes.	Go to line 38.			
				Current value of the
				portion you own?
				Do not deduct secured claims
. .				or exemptions.
	receivable or commiss	sions you already earned		
☑ No	D			
₩ Yes. I	Describe			s
Office	uipment, furnishings, a	nd cundiae	17 TOP STATE OF THE PROPERTY O	
			ines, rugs, telephones, desks, chairs, electronic device	es
☑ No	·		. 5	
Yes. [Describe		· · · · · · · · · · · · · · · · · · ·	
		THE THE CONTROL OF TH		Φ
		Marine many and a service of the control of the con	0.10	

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Debtor 1	E	Maria de la companya della companya de la companya de la companya della companya		Case number (if known)		
	First Name	Middle Name	Łast Name			
40. Machine	rv. fixtures. e	auipment, supp	lies vou use in husines	s, and tools of your trade		
☑ No	· , ,			-		
	Describe		***************************************	оминундага үзүн үн и ини ангастирингин үзүү ну ширүүдүүнү үч алаа тоо ангастын обый ангастын обый а	s	
	į.	CONTRACT CONTRACT OF CONTRACT	to the set the second decrease and the second decrease according to the second decrease according t			
41. Inventor	v					
☑ No	į	T 2000 T			***************************************	
☐ Yes.	Describe			Wake Many and the Wale of Wale and the Wale	\$	
	*-	- contraction of the contraction			**************************************	
	in partnersh	ips or joint vent	ures			
☑ No □ Yes	Describe	Name of entity:				
	20001130	Name of entity:		% of own	,	
					_%	
					-^ \$ % \$	
					-	
43. Custome	er lists, mailir	ig lists, or other	compilations			
	Do your lists	include person	ally identifiable informa	tion (as defined in 11 U.S.C. § 101(41A))?		
	□ No	parameter and the second and the sec	20 WWW.2000.000.000.000.0000.0000.0000.0			
	Yes. Desc	ribe			\$	
					And the Annual Market Confession	
	ness-related	property you di	d not already list			
✓ No □ Yes	Give specific					
	nation	*********			 \$	
					<u> </u>	
					<u> </u>	
					. \$	
					\$	
					\$	
45. Add the	dollar value o	of all of your ent	ries from Part 5, includ	ing any entries for pages you have attached	_ \$	0.00
for Part	5. Write that r	number here			→	
				same and the commence of the c	······································	VV
Part 6:	Describe A	ny Farm- and (Commercial Fishing-	Related Property You Own or Have an In	terest In.	
	lf you own o	have an interes	st in farmland, list it in l	Part 1.		
46 Do vou o	wn or have a	ny legal or egui	table interest in any far	m- or commercial fishing-related property?		
	So to Part 7.	ny logar or oqui	able interest in any lar	m- or commercial haming-related property:		
Yes.	Go to line 47.					
					Current value of	
					portion you own? Do not deduct secure	
47. Farm ani	mals				or exemptions.	
		oultry, farm-raise	d fish			
☑ No						
Yes		V 41-11/4-11/60		The second secon	and leaves resource a concern a con-, a co	
	o.ssv vanud				<u> </u>	

Page 19 of 48 SHIRLEY C. HUNTER Document Debtor 1 48. Crops-either growing or harvested Z No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Z No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed M No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☑ No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☑ No ☐ Yes. Give specific information..... 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 140,000.00 55. Part 1: Total real estate, line 2 16,000.00 56. Part 2: Total vehicles, line 5 1,400.00 57. Part 3: Total personal and household items, line 15 200.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 17,600.00 Copy personal property total → +\$____ 62. Total personal property. Add lines 56 through 61. 17.600.00 157,600.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.

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Case 17-16646

Doc 1

Filed 05/31/17

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Fill in this information to identify your ca	ase:		
1	e Name Last Name		
Debtor 2 ALBERT R. HUNTER (Spouse, if filing) First Name Middle	e Name Last Name		
United States Bankruptcy Court for the: Northern			
Case number (If known)			Check if this is an amended filing
Official Form 106C			
Schedule C: The P	roperty You	Claim as Exempt	12/15
Using the property you listed on Schedule A/E	B: Property (Official Form 106A	ether, both are equally responsible for supplying /B) as your source, list the property that you clain ditional Page as necessary. On the top of any ac	n as exempt. If more
specific dollar amount as exempt. Alternat of any applicable statutory limit. Some exe retirement funds—may be unlimited in doll	tively, you may claim the full f emptions—such as those for l lar amount. However, if you c amount and the value of the p	nount of the exemption you claim. One way o fair market value of the property being exemp health aids, rights to receive certain benefits, laim an exemption of 100% of fair market valu property is determined to exceed that amount,	eted up to the amount and tax-exempt ue under a law that
Part 1: Identify the Property You	Claim as Exempt		
Which set of exemptions are you clain	ming? Check one only, even if t	YOUR SDOUSE IS filing with YOU	
You are claiming state and federal ne			
☐ You are claiming federal exemptions	s. 11 U.S.C. § 522(b)(2)		

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Schedule A/B Check only one box for each exemption. Brief 735 ILCS 5/12-901 705 E. 156th Place **2** \$ 30,000.00 \$100,000.00 description: ☐ 100% of fair market value, up to Line from 1.1 any applicable statutory limit Schedule A/B: Brief 15656 So. Langley \$40,000.00 **2** \$ 4,000.00 Wild card description: 735 ILCS 5/12-1001(b) 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief **3**\$ description: ☐ 100% of fair market value, up to Line from Schedule A/B: any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) M No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No

☐ Yes

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Debtor 1

SHIRLEY C. HUNTER Middle Name

Last Name

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Case number (# known)

Part 2:

Additional Page

Brief descripti on Schedule A	on of the property and line t/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	3008 Toyota Sienna 17	\$500.00	\$ 500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
Brief description: Line from Schedule A/B:	2007 Toyota 4 Runn 16	\$500.00	\$ 500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
Brief description: Line from Schedule A/B:		\$	\$ \$00% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your case	se:				
Debtor 1 SHIRLEY C. HUNTER					
First Name Middle Debtor 2 ALBERT R. HUNTER	Name Last Name				
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name				
United States Bankruptcy Court for the: Northern	District of Illinois				
Case number					
(If known)				☐ Check	if this is an ed filing
				anende	su ming
Official Form 106D					
Schedule D: Creditor	s Who Have Cla	aims Secur	ed by Pron	ertv	12/15
Be as complete and accurate as possible information. If more space is needed, cop	y the Additional Page, fill it ou	g togetner, both are ed t, number the entries,	lually responsible to and attach it to this f	r supplying correct orm. On the top of	i any
additional pages, write your name and ca	se number (if known).				
1. Do any creditors have claims secured t					
No. Check this box and submit this for Yes. Fill in all of the information below	m to the court with your other so	hedules. You have nothi	ing else to report on th	is form.	
Yes. Fill in all of the information below					
Part 1: List All Secured Claims					
List all secured claims. If a creditor has r for each claim. If more than one creditor h As much as possible, list the claims in alple.	nas a particular claim, list the other	er creditors in Part 2.	Amount of claim Do not deduct the	Column B Value of collateral that supports this	Column C Unsecured portion
2.1	nabelical order according to the t	Seditor a name.		claim	If any
BRENDAN FINANCIAL, INC. Creditor's Name	Describe the property that sec	cures the claim:	\$ 130,000.00	\$150,000.00	_{\$} 20,000.00
30 East Avenue	Junior mortgage secured	d on 705 E. 156th			
Number Street	Pl., South Holland, IL 60				
Suite A	As of the date you file, the claim Contingent	im is: Check all that apply.			
D1	- Contingent				

		- ,			
BRENDAN FINANCIAL, INC.	Describe the property that secures the claim:	\$	130,000.00	\$_	150,000.00 \$ 20,000.00
Creditor's Name 30 East Avenue Number Street	Junior mortgage secured on 705 E. 156th Pl., South Holland, IL 60473				
Suite A	As of the date you file, the claim is: Check all that apply.				
Riverside IL 60546 City State ZIP Code	Contingent Unliquidated Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	_			
Date debt was incurred	Last 4 digits of account number				
2.2 Santander Consumer USA	Describe the property that secures the claim:	\$	20,000.00	\$_	5,000.00 \$ 5,000.00
Creditor's Name PO Box 961245 Number Street	2013 Nissan Juke motor vehicle	-			
Ft. Worth City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number	DEMPITE		Will Andrew	miller karlandi in 2000 Stationard II Pole kanan karlanda kanan da parakera in indonesia kanan da karlanda kar Kanan karlandi in 1900 Stationard II Pole kanan karlanda kanan da kanan da karlanda in indonesia karlanda karl
Add the dollar value of your entries in	n Column A on this page. Write that number here:	5 _	150,000.00		

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Middle Name

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Debtor 1

SHIRLEY C. HUNTER

Last Name

Case number (if known)

Part 1: Additional Page After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.3 Select Portfolio Servicing, Inc.	Describe the property that secures the claim:	\$ 110,000.00	\$ 150,000.00 s	-
Creditor's Name PO Box 65250				
Number Street	705 E. 156th Pl., South Holland, IL 60473			
Salt Lake City UT 84165	- As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contingent Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Judgment lien from a lawsuit			
— The local one of the debtors and another	Other (including a right to offset)	_		
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
2.4	Describe the property that secures the claim:	enwaren urie il errora rimetrapionismos lotterarioterismos i considerario.	**************************************	
Creditor's Name	Describe the property that secures the claim.		44	
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
UT 84165	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or secured			
Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
2.4	Describe the property that secures the claim:	S	\$\$	(1900-1904) - Sector Period of the American Section (1900)
Creditor's Name		-	V	
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
Check if this claim relates to a community debt	Other (moduling a right to disset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries	s in Column A on this page. Write that number here:	s 110,000.00		
If this is the last page of your form,	add the dollar value totals from all pages.	s 260,000.00		
Write that number here:	-	\$		

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P	art 2: List Others to Be Notifie	d for a Debt	That You Aiready	Listed
aç ye	gency is trying to collect from you for a di	ebt you owe to the debts tha	o someone else, list th t vou listed in Part 1. l	a debt that you already listed in Part 1. For example, if a collection e creditor in Part 1, and then list the collection agency here. Similarly, if ist the additional creditors here. If you do not have additional persons to
	Andrew T. Freund, Esq., C.P.A			On which line in Part 1 did you enter the creditor? $\frac{2.1}{}$
:	Name			Last 4 digits of account number
	24 East Avenue			
	Number Street			-
				-
	Riverside, IL 60546			_
	City	State	ZIP Code	
	Manley Deas Kochalski LLC			On which line in Part 1 did you enter the creditor? 2.4
	Name			Last 4 digits of account number
	PO Box 165028 Number Street			_
	Trumber Street			
	Columbus, OH 43216-5028			-
	City City	State	ZIP Code	-
	<u> </u>			THE IN THE SPACE WILL ASSOCIATE AND ANY TO THE THE SPACE AND AND ANY THE HEAVY THE
Ш	Brendan Mortgage, Inc.			On which line in Part 1 did you enter the creditor?
	dba Brendan Financial Inc. c/o	Harold Coll	ins	Last 4 digits of account number
	Number Street	. /	.,,0	
	8 S. Michigan Ave., Suite 1414			
	Chicago, IL 60603			•
	City	State	ZIP Code	-
	TO THE SIGNOCATE GRAND CONTINUES OF HET TRAIN TOPOCOMENT CONTINUES OF THE THE SIGNOCAL CONTINUES OF THE TRAIN CONTINUES OF THE TRAIN TOPOCOMENT.	NAMES OF THE STATE		On which line in Part 1 did you enter the creditor?
	Name			Last 4 digits of account number
	Number Street			•
	City	State	ZIP Code	MATERIAL CONTRACTOR CO
				On which line in Part 1 did you enter the creditor?
	Name			Last 4 digits of account number
	Number Street			
	Number Street			
	City	State	ZIP Code	
\neg	THE SECTION OF THE SE	S. A. C. Marin Davidson Construence		- COURT TO THE TOTAL THE PROPERTY OF THE PROPE
	Nome			On which line in Part 1 did you enter the creditor?
	Name			Last 4 digits of account number
	Number Street			
	City	State	ZIP Code	
	CONTROL OF THE PROPERTY OF THE			

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Fill in this information to identify your case:				
Debtor 1 SHIRLEY C. HUNTER				
First Name Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: Northern Distric	t of Illinois		Пс	heck if this is an
Case number (If known)				mended filing
055 1 5 4005 15				3
Official Form 106E/F	Who lieve the second 101.			
Schedule E/F: Creditors (Vho Have Unsecured Clai	ms		12/15
List the other party to any executory contracts or A/B: Property (Official Form 106A/B) and on Schecereditors with partially secured claims that are list		list executory (Official Formured by Prope	y contracts o m 106G). Do i e <i>rt</i> y, if more s	n S <i>chedule</i> not include any
 Do any creditors have priority unsecured clain No. Go to Part 2. 	ns against you?			
Yes.				
unsecured claims, fill out the Continuation Page o	f a claim has both priority and nonpriority amounts, list claims in alphabetical order according to the creditor's Part 1. If more than one creditor holds a particular clai instructions for this form in the instruction booklet.)	name If you h	have more tha er creditors in	n two priority Part 3. Nonpriority
2.1			10000000000000000000000000000000000000	***************************************
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that app	nlv		
City State ZIP Code	☐ Contingent	лу		
,	☐ Unliquidated			
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Disputed			
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the governmen	t		
Check if this claim is for a community debt	Claims for death or personal injury while you were			
Is the claim subject to offset?	intoxicated			
□ No □ Yes	Other. Specify	_		
2.2		0 F 1880 200 F 16 F	cannesses a accessor conservative Medical	***************************************
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number Street	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that app	ly.		
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 onlyAt least one of the debtors and another	Taxes and certain other debts you owe the government	t		
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Claims for death or personal injury while you were	•		
■ Crieck if this claim is for a community debt	to the state of th			

☐ No☐ Yes

Is the claim subject to offset?

Other. Specify_

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SHIRLEY C. HUNTER Debtor 1 Case number (if known)_ Part 1: Your PRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name	When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	☐ Contingent ☐ Unliquidated			
		☐ Disputed			
	Who incurred the debt? Check one.	·			
	☐ Debtor 1 only ☐ Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
	lacksquare Check if this claim is for a community debt	intoxicated Other. Specify			
	Is the claim subject to offset?				
	□ No □ Yes				
		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name				
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated☐ Disputed			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
	☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	— oneck if this claim is for a community dept	Other. Specify			
	Is the claim subject to offset?				
	□ No □ Yes				
7		- Charles with the first of the second control of the second contr		~ ************************************	
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	B
		When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	☐ Contingent ☐ Unliquidated			
		☐ Disputed			
	Who incurred the debt? Check one. Debtor 1 only	Tuno of DRIODITY			
	Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	 Domestic support obligations Taxes and certain other debts you owe the government 			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated Other. Specify	The filter is the condition of the distribution of the construction of the constructio		
	is the claim subject to offset?				
	□ No				
	Yes	THE THE THE THE SECOND ASSESSMENT OF THE			·

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SHIRLEY C. HUNTER

Debtor 1 Case number (if known)_

Pa	rt 2: List All of Your NONPRIORITY Unsecured Claims			
3.	Do any creditors have nonpriority unsecured claims against you			
	☐ No. You have nothing to report in this part. Submit this form to the ☐ Yes	e court with your other schedules.		
4.	List all of your nonpriority unsecured claims in the alphabetical connection on priority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, licalims fill out the Continuation Page of Part 2.	. For each claim listed, identify what type of claim it is. Do not	t list cla	vhearle amin
	1		Tota	al claim
4.1	Dell Financial Services c/o Nonpriority Creditor's Name	Last 4 digits of account number		4,087.00
	III. Corporate Services Co., 81 Adlai Stevenson Dr.	When was the debt incurred?	\$	+,007.00
	Number Street			
	Springfield IL 62703 City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
	State Zir Code	-		
	Who incurred the debt? Check one.	☐ Contingent☐ Unliquidated		
	☑ Debtor 1 only	☐ Disputed		
	Debtor 2 only			
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	į	
	✓ No ☐ Yes	✓ Other Specify Breach of contract		
	☐ Tes			
.2		Last 4 digits of account number	\$	
	Nonpriority Creditor's Name	When was the debt incurred?		
	Number Street			
	Number Street	As of the date you file, the claim is: Check all that apply.		
	City State ZiP Code	Contingent		
	Who incurred the debt? Check one.	☐ Unliquidated		
	☐ Debtor 1 only	☐ Disputed		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans		
		Obligations arising out of a separation agreement or divorce		
	☐ Check if this claim is for a community debt	that you did not report as priority claims		
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts		
	□ No □ Yes	Other. Specify		
.3	1997-1998-1998-1998-1998-1998-1998-1998-		······································	6. mm 1965 - 1988 1988 - 1988 1988 1988 1988 1988 1988 1988 1988 1988 1988 1988 198
	Nonpriority Creditor's Name	Last 4 digits of account number	s	
	,	When was the debt incurred?		
	Number Street			
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		☐ Contingent		
	Who incurred the debt? Check one.	☐ Unliquidated		
	□ Debtor 1 only □ Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	* ***		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	Student loans Obligations arising out of a congretion agreement or diverse		
	Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	□ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other: Specify		

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Debtor 1

SHIRLEY C. HUNTER

Case number (if known)___

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

ter listing any entries on this page, number them beginning wi	ith 4.4, followed by 4.5, and so forth.	Total clair
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	V
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent	
Miles in comment the state of t	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only Debtor 2 only		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
□ No	Other. Specify	
Yes		
The state of the s	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code		
State Zir Coue	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed	
Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
☐ No ☐ Yes		
Liquiding and another the speed of the speed of the secure and an another secure of the speed of the secure and an another secure an	\$\$\$\$\$ 70 A 2005 - 1922 1922 ABBORNOON HEN NO COLUMN TO THE STREET HE STREET	······································
Nonpriority Creditor's Name	Last 4 digits of account number	\$
	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 1 only Debtor 2 only	Torre of MOMPHODITY	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
-	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
□ No □ Yes		

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Debtor 1

SHIRLEY C. HUNTER

Middle Name

Last Name

Case number (if known)_

Part 3:	List Others to	Be Notified	About a Debt	That You	Already Listed
---------	----------------	-------------	--------------	----------	-----------------------

Blatt Ha	senmiller			On which entry in Part 1 or Part 2 did you list the original creditor?
	Wacker Drive	. #400		Line 11 of (Check analy
Number	Street			Line 1.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
				☑ Part 2: Creditors with Nonpriority Unsecured Cla
Chicago)	IL State	60606 ZIP Code	Last 4 digits of account number
Name	**************************************	1000	v 2000000000000000000000000000000000000	On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
City		State	ZIP Code	Last 4 digits of account number
Name		1981, 244 (Mercen i Mertinena adaminintalia ili 1920).		On which entry in Part 1 or Part 2 did you list the original creditor?
vanic				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
		····		Claims
City	0 M0/M000000000000000000000000000000000	State	ZIP Code	Last 4 digits of account number
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
lame		1 125 Pressour 2000 200 Address Pressor 2010 200	00000000000000000000000000000000000000	On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			□ Part 2: Creditors with Nonpriority Unsecured
				Claims
ity	000000000000000000000000000000000000000	State	ZIP Code	Last 4 digits of account number
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber	Street			Claims
ity		State	ZIP Code	Last 4 digits of account number
ame		2017/00/04/17 (sq. 100 10/20/20/14/44 Arranning (sq. 2017/00/00/	**************************************	On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber	Street			Part 2: Creditors with Priority Unsecured
				Claims
				Last 4 digits of account number

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Debtor 1

SHIRLEY C. HUNTER
First Name Middle Name

Last Name

Case number (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a. I	Domestic support obligations	6a.	\$	0.00
from Part 1		Taxes and certain other debts you owe the government	6b.	\$	0.00
		Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
		Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. 1	Fotal. Add lines 6a through 6d.	6e.	\$	0.00
				Total claim	
Total claims	6f. S	Student loans	6f.	Total claim	0.00
Total claims from Part 2	6g. C	Student loans Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	:	0.00
	6g. C	Obligations arising out of a separation agreement or divorce that you did not report as priority	-	\$	
	6g. C	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	\$	0.00

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Fi	ll in this ir	nformation to ide	ntify your	case:			
		SHIRLEY C. I					
De	ebtor	First Name	Mi	ddle Name	Last Name		
	ebtor 2 oouse If filing)	ALBERT R. I		ddle Name	Last Name		
	•			ern District of Illinois		ļ	
1	ase number	Daninapicy Countries	the Horas	on blother of fillings	•		
	known)	•			-		☐ Check if this is an
							amended filing
Of	ficial F	orm 106G	2				
					_ 4		
<u> </u>	near	ile G: Ex	ecut	ory Contr	acts and	Unexpired Leases	12/15
add	rmation. I itional pag Do you h	f more space is r ges, write your na ave any executo heck this box and	needed, co ne and c ry contrac file this for	py the additional passe number (if known ts or unexpired learn with the court with	page, fill it out, nown). ases? h your other sche	ogether, both are equally responsible for supumber the entries, and attach it to this page. dules. You have nothing else to report on this for listed on Schedule A/B: Property (Official Form	On the top of any
2.	List sepa	rately each perso rent, vehicle lea	on or com	oany with whom vo	ou have the cont	rract or lease. Then state what each contract m in the instruction booklet for more examples o	or loses is for /for
	Person o	r company with v	whom vou	have the contract	or loseo	State what the contract or lease is	5
·				navo ino oominaot	or icusc	State what the contract or lease is	ior
2.1							
	Name					_	
	Number	Street				_	
	City		C+-+-	710.0-1		_	
2.2	Oity	0.X1900000000000000000000000000000000000	State	ZIP Code			
2.2	Name					_	
	Number	Street				_	
	City	Transport (18, 18, 18, 18, 18, 18, 18, 18, 18, 18,	State	ZIP Code		<u>-</u>	
2.3							
	Name					-	
	Number	Street	· ·			-	
						_	
2.4	City	**************************************	State	ZIP Code	PORTONIA - A BARANTAN PORTONIA - A PROBABILIA - A P		
2.4	Name					-	
	Name						
	Number	Street				-	
	City		State	ZIP Code		-	
2.5				ann maakkkis liiseetskis anek liistetskiskoole	Letter in the transfer constitution and the constitution of the co	PRE DI DIDDOCKETSWARD FOLK TOPEN ET TROCKOMMENTERNE WERKET WERKET, KONSTRUCTIONSVORK VER HENNE F. OM FRESENSTRUME	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name					-	
	Number	Street				-	
	0:4					_	
	City		State	ZIP Code			

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SHIRLEY C. HUNTER Debtor 1 Case number (if known) Middle Name **Additional Page if You Have More Contracts or Leases** Person or company with whom you have the contract or lease What the contract or lease is for 2.<u>2</u> Name Number Street City ZIP Code State 2._ Name Number Street City State ZIP Code Name Number Street City State ZIP Code 2._ Name Number Street City

State

ZIP Code

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Fill in this information	to identify your case:			
Debtor 1 SHIRLE	Y C. HUNTER			
First Name	Middle Name	Last Name	-	
Debtor 2 ALBER	RT R. HUNTER			
(Spouse, if filing) First Name	Middle Name	Last Name	-	
United States Bankruptcy	Court for the: Northern District of Illin	nois		
Case number (If known)				-

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

. Do you have any coo	lebtors? (If you are filing a joint case,	do not list either snouse as	s a codehtor)
✓ No	the state of the s	, do not not chile! spouse as	s a codestor.)
☐ Yes			
Arizona, California, Id	rs, have you lived in a community p aho, Louisiana, Nevada, New Mexico	property state or territory? , Puerto Rico, Texas, Wash	? (Community property states and territories include hington, and Wisconsin.)
No. Go to line 3.			
	use, former spouse, or legal equivaler	nt live with you at the time?	
No No	community state or territory did you li	Q	Em : a
- res. III willest	community state or territory did you liv	ve /	Fill in the name and current address of that person.
Name of your spo	use, former spouse, or legal equivalent		
Number S	treet		
Main Boil	11000		
City	State	ZIP Code	
In Column 4 But all a			if your spouse is filing with you. List the person
Schedule D (Official	Form 106D), Schedule E/F (Official ledule G to fill out Column 2.	s a guarantor or cosigner Form 106E/F), or Schedul	r. Make sure you have listed the creditor on le G (Official Form 106G). Use Schedule D,
Schedule D (Official	Form 106D), <i>Schedule E/F</i> (Official ledule G to fill out Column 2.	s a guarantor or cosigner Form 106E/F), or S <i>chedul</i>	r. Make sure you have listed the creditor on le G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the deb
Schedule D (Official Schedule E/F, or Sch	Form 106D), <i>Schedule E/F</i> (Official ledule G to fill out Column 2.	s a guarantor or cosigner Form 106E/F), or S <i>chedul</i>	le G (Official Form 106G). Use Schedule D,
Schedule D (Official Schedule E/F, or Schedule E/F, or Schedule 1: Your code	Form 106D), <i>Schedule E/F</i> (Official ledule G to fill out Column 2.	s a guarantor or cosigner Form 106E/F), or <i>Schedul</i>	le G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the deb Check all schedules that apply:
Schedule D (Official Schedule E/F, or Sch Column 1: Your code	Form 106D), <i>Schedule E/F</i> (Official ledule G to fill out Column 2.	s a guarantor or cosigner Form 106E/F), or Schedul	le G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the deb
Schedule D (Official Schedule E/F, or Schedule E/F, or Schedule 1: Your code	Form 106D), <i>Schedule E/F</i> (Official ledule G to fill out Column 2.	s a guarantor or cosigner Form 106E/F), or Schedul	Le G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line
Schedule D (Official Schedule E/F, or Sch Column 1: Your code	Form 106D), <i>Schedule E/F</i> (Official ledule G to fill out Column 2.	S a guarantor or cosigner Form 106E/F), or Schedul	Le G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line
Schedule D (Official Schedule E/F, or Sch Column 1: Your code	Form 106D), <i>Schedule E/F</i> (Official ledule <i>G</i> to fill out Column 2.	Form 106E/F), or Schedui	Le G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line
Schedule D (Official Schedule E/F, or Sch Column 1: Your code Name Number Street City	Form 106D), <i>Schedule E/F</i> (Official ledule <i>G</i> to fill out Column 2.	Form 106E/F), or Schedui	Le G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line
Schedule D (Official Schedule E/F, or Sc	Form 106D), <i>Schedule E/F</i> (Official ledule <i>G</i> to fill out Column 2.	Form 106E/F), or Schedui	Column 2: The creditor to whom you owe the debt check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Schedule D (Official Schedule E/F, or Sch Column 1: Your code Name Number Street City	Form 106D), Schedule E/F (Official ledule G to fill out Column 2.	Form 106E/F), or Schedui	Column 2: The creditor to whom you owe the debender of the character of th
Schedule D (Official Schedule E/F, or Sc	Form 106D), Schedule E/F (Official ledule G to fill out Column 2.	Form 106E/F), or Schedui	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule E/F, line Schedule D, line
Schedule D (Official Schedule E/F, or Sc	Form 106D), Schedule E/F (Official ledule G to fill out Column 2.	Form 106E/F), or Schedul	Column 2: The creditor to whom you owe the debendaries that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule G, line
Schedule D (Official Schedule E/F, or Sc	Form 106D), Schedule E/F (Official ledule G to fill out Column 2.	Form 106E/F), or Schedul	Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line
Schedule D (Official Schedule E/F, or Sc	Form 106D), Schedule E/F (Official ledule G to fill out Column 2.	Form 106E/F), or Schedul	Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule F/F, line Schedule D, line Schedule D, line
Schedule D (Official Schedule E/F, or Sc	Form 106D), Schedule E/F (Official ledule G to fill out Column 2.	Form 106E/F), or Schedul	Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line

Entered 05/31/17 10:04:53 Case 17-16646 Doc 1 Filed 05/31/17 Desc Main Document Page 34 of 48 SHIRLEY C. HUNTER Debtor 1 Case number (if known) **Additional Page to List More Codebtors** Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3._ ☐ Schedule D, line Name ☐ Schedule E/F, line ____ ☐ Schedule G, line ____ Number Street City State ZIP Code ☐ Schedule D, line ____ Name ☐ Schedule E/F, line ____ ☐ Schedule G, line ____ Number Street City ☐ Schedule D, line _____ Name ☐ Schedule E/F, line _____ ☐ Schedule G, line ____ Number Street City State ZIP Code

ZIP Code

ZIP Code

ZIP Code

ZiP Code

☐ Schedule D, line ____

□ Schedule E/F, line ____
□ Schedule G, line ____

☐ Schedule D, line _____

☐ Schedule D, line _

☐ Schedule E/F, line ___

☐ Schedule G, line _____

☐ Schedule D, line ___

☐ Schedule D, line

□ Schedule E/F, line _____
□ Schedule G, line _____

□ Schedule E/F, line _____
□ Schedule G, line _____

☐ Schedule E/F, line _____
☐ Schedule G, line _____

City

Name

Number

Street

Street

Street

Street

Street

State

State

State

State

State

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Fill in this in	formation to identify	your case:								
Debtor 1	SHIRLEY C. HUI	NTER								
Debtor 2	First Name ALBERT R. HUI		Last Name							
(Spouse, if filing)		Middle Name	Last Name							
United States I	Bankruptcy Court for the:	Northern District of Illinois								
Case number (If known)					i	Check if				
							mended filing oplement showing pos	donatition - b		
Official Fa	4001						ne as of the following		iapter 13	
Official Fo		DD / YYYY								
		ur Income							12/15	
If you are separate shee	rect information. If yarated and your spoi	ossible. If two married peopou are married and not filinuse is not filing with you, detop of any additional page	g jointly, and yo	our s form	pouse is livi	ing with	you, include informati	on about yo		
1. Fill in your informatio	employment n.		Debtor 1				Debtor 2 or non-	filina snous	e	
If you have more than one job, attach a separate page with information about additional employers.			☐ Employed ☑ Not employed			☑ Employed □ Not employed				
Include part-time, seasonal, or self-employed work.							Day Care at has			
	Occupation may include student or homemaker, if it applies.							Day Care at home		
		Employer's name				·	Self		 :	
		Employer's address	Number Street			156 E. 156th Place Number Street				
			City	Sta	ite ZIP Code)	South Holland	IL 6	60473 Code	
		How long employed there	oyed there? 15 years			15 years				
Part 2: G	ive Details About	Monthly Income								
Estimate m spouse unle	onthly income as of ess you are separated. Ir non-filing spouse ha	the date you file this form.	combine the info						n-filing	
					For Deb	otor 1	For Debtor 2 or non-filing spouse			
List monthly gross wages, salary, and commissions (before deductions). If not paid monthly, calculate what the monthly was			re all payroll age would be.	2.	\$	0.00	\$ <u> 0.00 </u>			
3. Estimate a	nd list monthly overl	time pay.		3.	+\$		+ \$			
4. Calculate g	gross income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$0.00	<u> </u>		

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Debtor 1 SHIRLEY C. HUNTER First Name Middle Name Last Name			Case number (if know						
			For Debtor 1	For Debtor 2 or non-filing spouse					
Сору	line 4 here	> 4.	\$	\$					
5. List a	III payroll deductions:								
5a.	Tax, Medicare, and Social Security deductions	5a.	\$	\$					
	Mandatory contributions for retirement plans	5b.	•	\$					
5c.	Voluntary contributions for retirement plans	5c.	\$	\$					
5d.	Required repayments of retirement fund loans	5d.		\$					
5e.	Insurance	5e.	\$	\$					
5f.	Domestic support obligations	5f.	\$	\$					
5g.	Union dues	5g.	\$	\$					
5h.	Other deductions. Specify:	5 h.	+\$	+ \$					
6. Add	the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$	\$					
7. Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$					
8. List a	all other income regularly received:								
	Net income from rental property and from operating a business, profession, or farm								
1	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$2,500.00					
8b. i	nterest and dividends	8b.	\$	\$					
	Family support payments that you, a non-filing spouse, or a depende regularly receive	nt							
	nclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$					
	Jnemployment compensation	8d.	\$	\$					
	Social Security	8e.	\$	\$					
l t	Other government assistance that you regularly receive nounced cash assistance and the value (if known) of any non-cash assistant hat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Social Security	ce 8f.	\$ <u>1,100.00</u>	\$					
	Pension or retirement income		·	· · · · · · · · · · · · · · · · · · ·					
		8g.	\$	\$					
8h. (Other monthly income. Specify: Son's SSI	8h.	+\$ 600.00	+\$					
	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_1,700.00	\$2,500.00					
10. Calcu Add ti	late monthly income. Add line 7 + line 9. ne entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ +	·=	\$ 4,200.00				
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.									
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Social Security 11. + \$									
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. \$\frac{4,200.00}{Combined}\$									
13. Do y e	ou expect an increase or decrease within the year after you file this fo	orm?			monthly income				
☐ Y	es. Explain:								

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Fill in this information to identify	your case:			
Debtor 1 SHIRLEY C. HUN	ITER			
First Name	Middle Name Last Name	Check if this	is:	
Debtor 2 ALBERT R. HUN (Spouse, if filing) First Name	Middle Name Last Name	An amen	-	
United States Bankruptcy Court for the:	Northern District of Illinois		ment showing post s as of the following	petition chapter 13 g date:
Case number(If known)		MM / DD /	YYYY	
Official Form 106J				
Schedule J: Yo	ur Expenses			12/15
Be as complete and accurate as p information. If more space is need (if known). Answer every question Part 1: Describe Your Hotel		ing together, both are equally res n. On the top of any additional pa	ponsible for supply ges, write your nam	ing correct e and case number
1. Is this a joint case?				77.4
No. Go to line 2. Yes. Does Debtor 2 live in a	separate household?			
	le Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
Do you have dependents? Do not list Debtor 1 and Debtor 2.	☐ No ☐ Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents'	each dependent	CHILD	24	□ No
names.		OFFICE	24	✓ Yes
		CHILD	22	☐ No ☑ Yes
		CHILD	11	☐ No ☑ Yes
				☐ No ☐ Yes
				☐ No ☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	☑ No ☐ Yes			
Estimate your expenses as of your expenses as of a date after the bar applicable date. Include expenses paid for with nor	bankruptcy filing date unless you a skruptcy is filed. If this is a supplementable government assistance if you to it on Schedule I: Your Income (Office)	ental S <i>chedule J</i> , check the box a I know the value of	nt in a Chapter 13 c It the top of the form Your expe	n and fill in the
4. The rental or home ownership e any rent for the ground or lot.	expenses for your residence. Include	first mortgage payments and	\$	1,048.00
ff not included in line 4:				
4a. Real estate taxes			4a. \$	0.00
4b. Property, homeowner's, or re	enter's insurance		4b. \$	0.00
4c. Home maintenance, repair, a			4c. \$	100.00
4d. Homeowner's association or	condominium dues		4d. \$	0.00

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Debtor 1

SHIRLEY C. HUNTER
First Name Middle Name

Last Name

Case number (if known)__

			Your exp	enses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	TALAN PERSONAL PROPERTY AND
6.		Э.		
0.	6a. Electricity, heat, natural gas	6a.	\$	200.00
	6b. Water, sewer, garbage collection			50.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6b.	\$	
	6d. Other. Specify: Cable, internet & phone	6c.	\$	450.00
7.	Food and housekeeping supplies	6d.	\$	550.00
8.	Childcare and children's education costs	7.	\$	2.00
9.	Clothing, laundry, and dry cleaning	8.	\$	FO 00
10.	Personal care products and services	9.	\$	50.00
11.	Medical and dental expenses	10.	\$	
12.	Transportation. Include gas, maintenance, bus or train fare.	11.	\$	100.00
12.	Do not include car payments.	12.	\$	475.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	60.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	400.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			0.00
	17a. Car payments for Vehicle 1	17a.	\$	
	17b. Car payments for Vehicle 2	17b.	\$	
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify: 0	17d.	\$	0.00
	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues			

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Debto	or 1	SHIRLEY C. HUNTER First Name Middle Name Last Name	Case number (if known)	*************************************	
21. C	Other. S	Specify:	21.	+\$	0.00
22. C	alculat	te your monthly expenses.			- Partie Portin Contribution (1900) 19 formal amount of the contribution of the contri
2:	2a. Add	I lines 4 through 21.	22a.	**************************************	The control of the second
2:	2b. Cop	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	A CONTRACTOR OF THE CONTRACTOR
2:	2c. Add	l line 22a and 22b. The result is your monthly expenses.	22 c.	\$	of the special before page.
23. Ca	ilculate	your monthly net income.			
23		py line 12 (your combined monthly income) from Schedule I.	23a .	\$	4,200.00
231	o. Co _l	py your monthly expenses from line 22c above.	23b.	-\$	3,233.00
230		otract your monthly expenses from your monthly income. e result is your monthly net income.	23c .	\$	967.00
24. Do	you e	xpect an increase or decrease in your expenses within the year after you fil	e this form?		
		ple, do you expect to finish paying for your car loan within the year or do you exp payment to increase or decrease because of a modification to the terms of your			
Ø	No.				
	Yes.	Explain here:			

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Fill in this in	formation to ident	ify your case:			
Debtor 1	SHIRLEY C. H	UNTER			
Dahana	First Name ALBERT R. H	Middle Name	Last Name		
Debtor 2 (Spouse, if filing		Middle Name	Last Name		
United States	Bankruptcy Court for t	he: Northern District of III	linois		
Case number					
(II KIIOWII)					☐ Check if this is
				 J	amended filing
Officia	I Form 106	Dec			
					
Deci	aration <i>i</i>	About an I	ndividua	l Debtor's Schedules	12/1
If two mar	riod noonlo are filis	ag tagathar bath are a			- 1 1 1
				or supplying correct information.	
You must	file this form when	ever you file bankrupto	y schedules or ame	ended schedules. Making a false statement, cond	cealing property, or
obtaining	money or property	by fraud in connection	with a bankruptcy	case can result in fines up to \$250,000, or impris	sonment for up to 20
years, or r	otn. 18 U.S.C. §§ 1	52, 1341, 1519, and 357	71.		
	Sign Below				
	Sign Below				
Did yo	pay or agree to p	ay someone who is NO	T an attorney to hel	lp you fill out bankruptcy forms?	
✓ No					
	. Name of person			Attach Bankruptcy Petition Preparer's Notice, Dec	Jaratian and
	,			Signature (Official Form 119).	iaration, and
				Signature (Sindian Sin 175).	
Under	enalty of perjury,	I declare that I have rea	ad the summary and	schedules filed with this declaration and	
that the	y are true and con	rect.	•		
V		1			
Ι	$\mathcal{X} = I_{\mathcal{I}}$	\cap	$\Lambda \Lambda$	Λ .	
X	Meller	Hun Ks	× UVI	et Roberto	
Signatu	re of Debtor 1	10	Signature of I	Debtor 2	

Date 05/23/2017

MM / DD / YYYY

 $\mathsf{Date} \; \frac{\mathsf{05/23/2017}}{\mathsf{MM} \; / \; \mathsf{DD} \; / \; \; \mathsf{YYYY}}$

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court

Northern District Of Illinois

Shirley C. Hunter and Albert R. Hunter

Case No.

Debtor

Chapter 13

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept
	Prior to the filing of this statement I have received
	Balance Due
2.	The source of the compensation paid to me was:
	X Debtor Other (specify)
3.	The source of compensation to be paid to me is:
	X Debtor Other (specify)
1.	\bar{x} I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
	c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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B2030 (Form	2030)	(12/15))
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- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/30/2017

/s/ Steven O. Hamill

Date

Signature of Attorney

Name of law firm

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Meet and consult with debtors, prepare Voluntary Petition, schedules, Plan; review debtor's financials.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

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F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

rep	Any attorney retained to represent a debtor in a Chapter 13 case is responsible for presenting the debtor on all matters arising in the case unless otherwise ordered by the court. It all of the services outlined above, the attorney will be paid a flat fee of \$\frac{4000.00}{}.
2.	In addition, the debtor will pay the filing fee in the case and other expenses of $\underbrace{0}_{}$.
3.	Before signing this agreement, the attorney received \$ 1500.00
	toward the flat fee, leaving a balance due of \$ 2500.00 ; and \$ 310.00 for expenses,
	leaving a balance due of \$0
atto app the	In extraordinary circumstances, such as extended evidentiary hearings or appeals, the orney may apply to the court for additional compensation for these services. Any such olication must be accompanied by an itemization of the services rendered, showing the date, time expended, and the identity of the attorney performing the services. The debtor must be wed with a copy of the application and notified of the right to appear in court to object.
Sig L De	ened: Aluly Hurth Whore for the Debtor(s)
Do	not sign this agreement if the amounts are blank.